## National Institutes of Health Division of International Services Office of Research Services

## **Change of Address Notice**

Federal rules and regulation require all non-immigrants to notify the United States Citizenship and Immigration Services (USCIS), formerly the Immigration and Naturalization Service, of a change of address within (10) days of the move. Use this form to notify the Division of International Services (DIS) of your change of address.

## NIH sponsored J-1 and J-2 Exchange Visitors

NIH sponsored J-1 and J-2 Exchange Visitors **MUST** notify DIS of a change of address within ten (10) days in order for DIS to report the change in the Student Exchange Visitor Information System (SEVIS) within the authorized time frame. DIS notification fulfills USCIS's change of address requirements. Failure to report the change of address is a violation of immigration status and may lead to termination of the participant's stay in the US and/or other penalties as set by the Department of Homeland Security.

Family Name	Name First Name		Middle Name		Date of Birth (MM/DD/YYY	
SN or SEVIS ID number, if any Current immi		mmigration status	Country of	Citizenship		
Place of residence						
	Street	Apt #	City	State	Zip	
Mailing address, if differe	ent than above:					
	Street	Apt #	City	State	Zip	
Note: Place of residence	is required.					
Previous US address:						
	Street	Apt #	City	State	Zip	
This form does not repla USCIS. All non J-1 Excl continue to file AR-11 S Form AR-11 SR or AR-	hange Visitors must R as required by U	t continue to file fo SCIS. The appropr	rm AR-11 and all Siate form must be f	Special Registratio iled to notify USC	n individuals must	
Signature REQUIRED			Date REQ	UIRED		
Send or Deliver form to:	National Institutes of Health Division of International Services/ORS 31 Center Drive MSC 2028 Building 31 Room B2B07 Bethesda, MD 20892 (301) 496-6166 Fax (301) 496-0847 www.nih.gov/od/ors/dirs/isb/isb.htm					

(date). RO/ARO

(initials).

DIS Rev. 7/26/2004

DIS USE ONLY: Updated in SEVIS